POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-5-01
FORMALITY REVIEW	MTB	954	2/21/01
RESPONSE FORMALITY REVIEW	SS	573	0516-0;
	MO	dan	06/12/02

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
− (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date							
Final	Original								
	1	✓							
	2	✓							
	3	✓							
	4	✓							
	5								
	6								
	7								
	8	✓							
	9	✓							
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	11	✓							
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	14								
	15	✓							
	16	✓							
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	18	✓							
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	49								
	50								

Claim	Date
51–100	

Claim	Date
101–150	

If more than 150 claims or 10 actions
stapl additional sheet here

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